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 U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

# FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended, Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only				
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.				
1. File Number U - 19050	2. Fiscal Year Covered From:			
·	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name John E McKee Jr.	Name Plumbers AFL-CIO LU 5			
	Labor Organization File Number 020-400			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 5891 Allentown Road	Street 5891 Allentown Road			
City Camp Springs	City Camp Springs			
State Maryland ZIP Code + 4 20746-4570	State Maryland ZIP Code + 4 20746-4570			
5. Position in labor organization. Business Manager				
Enter appropriate data below if, during the past fiscal year, you or your sponsor (except as specified in the excional A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizat	usions set forth in the instructions):			
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., If any	7.b. Amount.			
Street (				
City (1) - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
State ZIP Code + 4				
	<u> </u>			
Sign	nature			
15. Signature and verification. The undersigned declares, under penalty of	Perjury and other applicable penalties of the law, that all of the information ying documents), has been examined by the signatory and is, to the best of the			
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany	Perjury and other applicable penalties of the law, that all of the information ying documents), has been examined by the signatory and is, to the best of the			

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Name of Person Filing John McKee Jr.	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary versubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	rwise dealing with the business tively seeking to represent, or directly to, or otherwise	
8. Name and address of Business (including trade name, if any).  Name Plumbers & Pipefitters Apprenticeship Fund  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 8509 Ardwick Ardmore Road  City Landover  State Maryland ZIP Code + 4 20785	9. Business deals with:   a. Labor Organization  b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name   Trade Name, If any:  P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing.  Accepts contribution on behalf of employees covered by CBA in order to provide education for apprentices and journeypersons in the plumbing and pipefitting industry.	
Street  City  State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$930,415  12.a. Nature of interest held or income received.  Received two tickets to the Apprentice Graduation Ceremonies.	
C. Received from any employer (other than an employer covered undo or from any labor relations consultant to an employer any payment of money		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	14.a. Nature of payment.	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

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Name of Person Filing John McKee Jr.	File Number U-
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#### Part B Continuation Page

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name MCA of Metropolitan Washington, Inc.	a. Labor Organization	
Trade Name, if any:	(Z.S)	
P.O. Box, Bidg., Room No., if any	Basin vijand	
Street 4601 Presidents Drive #120	c. Employer	
City  Lanham		
State Maryland ZIP Code + 4 20706		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	AND THE CONTRACT OF THE CONTRA
Name	The Mechanical Contractors Associa Metropolitan Washington is a membe	ership
Trade Name, if any:	organization of contractors who bu plumbing, heating, ventilation, ai and refrigeration systems in Washi	r conditioning
P.O. Box, Bldg., Room No., if any	Virginia and Maryland.	
Street ( )		TO SOUTH THE PROPERTY OF THE P
City (		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	-0-
·	12.a. Nature of interest held or income received.	
	Attend MCAMW spring business dinne value of dinner \$40.	r meeting. Approx
		V common V
	,	
		- Company
	12.b. Amount.	\$40

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Name of Person Filing John McKee Jr.	File Number U-
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## Part B Continuation Page

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Poole & Kent Corporation	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 4530 Hollins Ferry Road	c. Employer	
City Baltimore		
State Maryland ZIP Code + 4 21227		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
	Poole & Kent Corporation is a signal with Plumbers Local 5.	tory contractor
Trade Name, if any:		La de la Companya de
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$635,827
	12.a. Nature of interest held or income received.	and the state of t
	Received unsolicited Christmas ham	
	Committee of the Commit	U
	12.b. Amount.	\$50

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Name of Person Filing John McKee Jr.	File Number U-
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## Part B Continuation Page

8. Name and address of Business (Including trade name, if any).	9. Business deals with:	<del></del>
Name CAUSE  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 4601 Presidents Drive #120  City Lanham  State Maryland  ZIP Code + 4 20706	9. Business deals with:	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	CAUSE was established to protect, fairly and equitably, the interest of the consumer and the general public as well as those of labor and management in the construction industry. Cause promotes better labor-management relations.	
State ZIF Code + 4	11.b. Approximate dollar value of such dealing.	\$150,000
	12.a. Nature of interest held or income received.  Receive (2) tickets (total value a a CAUSE sponsored outing at the Bo members of Local Union were able t tickets.	wie Bay-Sox. All
	12.b. Amount.	\$70

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Name of Person Filing John McKee Jr.	File Number U-
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### Part B Continuation Page

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Plumbers & Pipefitters Medical Fund	a. Labor Organization	
Trade Name, if any:	<u> </u>	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 4600 Powder Mill Road	c. Employer	
City Beltsville		
State Maryland ZIP Code + 4 20705-2675		: 
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	MARKAN ARROWS AND
Name	The Fund covers employees in jobs with Local 5. Employers make contr	
Trade Name, if any:	fund for every hour worked in order Heath and Welfare benefits to elig	r to provide
P.O. Box, Bldg., Room No., if any		- Control of the Cont
F.O. BOX, DIOS., MODITINO., II daily		V dynas appro
Street		) on the control of t
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$9,497,677
	12.a. Nature of interest held or income received.	Professional Control of the Control
	Reimbursement for lunches (4) during quarterly meetings minimum 10 attermeeting.	ing Medical Fund ndees per
		7-7-7-11-11-11-11-11-11-11-11-11-11-11-1
		(CLEANING TO A CLEANING TO A C
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		ie strate de series
·		or standard and additional and the standard and the stand
	12.b. Amount.	\$495

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## Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name MCA of Metropolitan Washington, Inc.	a. Labor Organization	
Trade Name, if any:	b. Trust	
P.O. Box, Bldg., Room No., if any	c. Employer	
Street 4601 Presidents Drive #120	C. Limpioyei	
City Lanham		
State Maryland ZIP Code + 4		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a, Nature of such dealing.	COURT A ADMINISTRATION OF THE PART AND A PART OF THE PART AND A PART OF THE PART AND A PART OF THE PAR
Name Trade Name, if any:	The Mechanical Contractors Associa Metropolitan Washington is a member organization of contractors who but plumbing, heating, ventilation, ai	rship ild and service r conditioning
P.O. Box, Bldg., Room No., if any	and refrigeration systems in Washi. Virginia and Maryland.	ngeon, DC.,
City		MARK AND VANDOROMOROMORALA AND VANDOROMORALA
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	+ 0 -
•	12.a. Nature of interest held or income received.	discrete with the Latter being to get the following decreases as well as the second
	MCA bought dinner while attending to a Maintenance Agreement Oversigth the held in Morgantown WV.	National Service Committee meeting
		en e
	A CONTRACT OF A	COLON MALINE DAMA CAMPAGORAGE COLON DE COLON DE LA
	12.b. Amount.	\$51

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Name of Person Filing John McKee Jr.	File Number U-
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## Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name CAUSE		
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 4601 Presidents Drive #120	c. Employer	
City Lanham	]	
State Maryland ZIP Code + 4 20706		
10. If 9,b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	anno ann bailteanna ataman ann ann an an an an an an an an an
Name	CAUSE was established to protect, for equitably, the interest of the congeneral public as well as those of	sumer and the
Trade Name, if any:	management in the construction indepromotes better labor-management re	ústry. Cause
P.O. Box, Bldg., Room No., if any		
Street		
City		The statement of the second of
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$150,000
	12.a. Nature of interest held or income received.	
	Received Christmas gift basket (wir	ne and cheese)
		**************************************
		ng - obadillawaristo wak dayaya yaya sara-ara-baharatar yaw si - 1 day ,
	12.b. Amount.	\$75

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Name of Person Filing John McKee Jr.	 File Number U-	
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#### Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Carday Associates Inc	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 4600 Powder Mill Road	c. Employer	
City Beltsville		
State Maryland ZIP Code + 4 20705		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	<del></del>
Name Plumbers & Pipefitters Medical Fund	Third party administrator who produced claims for the Plumbers Lo	ess and payes cal 5 Medical
Trade Name, if any:	Fund	general in the control
P.O. Box, Bldg., Room No., if any		
Street 4600 Powder Mill Road		
City Beltsville	Amountained in the Parameter or high Printing and a parameter of the Param	make makey information of the control of the contro
State Maryland ZIP Code + 4 20705	11.b. Approximate dollar value of such dealing.	\$314,286
	12.a. Nature of interest held or income received.	
	2 business lunches for calender ye \$80.00	ar 2004 total of
		and the second s
		T. C.
		z an extraory
		200
		a l
	12.b. Amount.	\$80

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Name of Person Filing John McKee Jr.	File Number <b>U-</b>
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## Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	——·
Name Columbia Partners L.L.C. Investment Manageme	a. Labor Organization	
Trade Name, if any:	b. Trust	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 1775 Pennsylvania Avenue	c. Employer	
City Washington		
State District of Columbia ZIP Code + 4 20006		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a, Nature of such dealing.	
Name Plumbers & Pipefitters Medical Fund	Manages the assets of the Plumbers Medical Fund	& Pipefitters
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 4600 Powder Mill Road		
City Beltsville		W ANDRON S. S. WARTS MAY VALUE V. J. 1964 (1970) S. A.
State Maryland ZIP Code + 4 20705	11.b. Approximate dollar value of such dealing.	\$38,123
	12.a. Nature of interest held or income received.	Brown actions of the set Separates
	Attended 1 business dinner in cale	nder year 2004
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	,	in boards to be extended.
		unigerado e
j	, .	scanning second
		u po y y y y y y y y y y y y y y y y y y
	To ware pronouncement where consumers and another information and another info	in the delete described and which is 1981 as such a such a such a fine of the such a s
	12.b. Amount.	\$49